SENDER: COMPLETE THIS SECTION	COMPLETE THE OLD TO
 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	A. Signature X
1. Article Addressed to:	D. Is delivery address different from Item 1? Yes If YES, enter delivery address below:
BARBARA LAWSON AURORA O'IL AND GAS CORP 4110 COPPER RIDGE DR STE 100 TRAVERSE CITY MI 49684	
40	3. Service Type Certified Mail Registered Receipt for Merchandise C.O.D.
PB 10/14/09 S0030035	4. Restricted Delivery? (Extra Fee)
2. Article Number (Transfer from service labe 7003 v2260	1 0008 1243 8409
PS Form 3811, February 2004 Domestic Ret	rum Receipt 102595-02-M-1540

0247 8409	U.S. Postal Service CERTIFIED MAIL RECEIPT (Domestic Mail Only; No Insurance Coverage Provided) For delivery information visit our website at www.usps.com PSO 15/74/69 AS03355		
2000	Postage	\$	Reclamation
	Certified Fee		Particod
	Return Reciept Fee (Endorsement Required)		Postmark Here
260	Restricted Delivery Fee (Endorsement Required)		
'n	Total Postag	2404	
7003	Sent To AURO	BARA LAWSON DRA OIL AND G	AS CORP 7
7	SCHOOL APIC No. 4110	COPPER RIDGE ERSE CITY MI	EDR STF 100
	PS Form 3800, June 2002		See Reverse for Instructions

MATUNIBUCSTABB/P267926888VGQ:11 AH • Sender: Please priktyour name address, and ZIP-4 in this box • Harlanda Harallanda Ha PENNY BERRY
STATE OF UTAH
DIVISION OF OIL GAS & MINING
PO BOX 145801
SALT LAKE CITY UT 84114-5801 RECEIVED OCT 26 2009 First-Class Mail
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